

State of California - Health and Welfare Agency
HAZARDOUS WASTE MANAGEMENT BRANCH
714 744 P Street
Sacramento, CA 95814

UNIFORM HAZARDOUS WASTE MANIFEST

Department of Health Services

Please print or type with ELITE type 12 characters per inch

STATE ID NUMBER 83410846

GENERATOR NAME AND MAILING ADDRESS

F.M. THOMAS AIRCONDITIONING
231 Gemini Ave.
Brea, Ca.

AREA CODE PHONE NUMBER 818/448-1902

MANIFEST DOCUMENT NUMBER

EPA ID NUMBER

CAT000038034

TRANSPORTER NO 1

F.M. Thomas Airconditioning

VEH CONTAINER NO

EPA ID NUMBER

CAT000038034

TRANSPORTER NO 2 ALTERNATE TSD FACILITY

VEH CONTAINER NO

EPA ID NUMBER

TREATMENT STORAGE OR DISPOSAL TSD FACILITY

Omega Chemical Corp.
12504 E. Whittier Blvd.
Whittier, CA. 90602

AREA CODE PHONE NUMBER 213/698-0991

EPA ID NUMBER

CAD042245001

PROPER U.S. DOT SHIPPING NAME AND HAZARD CLASS

UN NA
NUMBER

TOTAL
QUANTITY

UNIT
WT VOL

CONTAINER
NO TYPE

WASTE
CAT NO METH

Hazardous Waste Liquid N.O.S ORM-E
R-11

N A 9189

800 P

04

DM

211 01

COMPONENTS

CONC RANGE
UPPER LOWER

UNITS
% PPM

SPECIAL HANDLING INSTRUCTIONS

This is to certify that the above-named wastes are properly classified, described, packaged, marked, and labeled, and are in proper condition for transportation according to the applicable requirements of the Department of Transportation and the EPA

Printed or typed full name and signature

BRIAN PACE

MO

DAY

YR

12

17

84

Check if continuation sheet is used (Number of continuation sheets)

TRANSPORTER 1 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

BRIAN PACE

DATE
REC'D
&
ACCEPTED

MO

DAY

YR

12

17

84

TRANSPORTER 2 ACKNOWLEDGEMENT OF RECEIPT OF ABOVE WASTES

Printed or typed full name and signature

DATE
REC'D
&
ACCEPTED

MO

DAY

YR

DISCREPANCY INDICATION SPACE

Brought in 3 200 lbs drums
600 lbs TOTAL

Facility owner or operator: Certification of receipt of hazardous waste covered by this manifest except as noted in the discrepancy indication space above. Note: TSD must complete waste number. See instructions. Omega Chemical

Printed or typed full name and signature

Tim Baltierra

EPA ID NUMBER

CAD042245001

DATE RECEIVED & ACCEPTED

MO

DAY

YR

12

17

84

FORM NO. DHS-8022A 11/82

TSDF SENDS THIS COPY TO DOHS WITHIN 15 DAYS